

# UTILITY PATENT APPLICATION TRANSMITTAL

□ DUPLICATE

Address to:  
Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Attorney Docket No.

INOUE3001/JEK

First Named Inventor  
(or identifier)

Kouichiro INOUE

Total Pages

39

Transmitted herewith is a patent application under 37 CFR 1.53(b).

Entitled:

MICROALLOYED STEEL EASY TO SEPARATE BY FRACTURE  
SPLITTING AT LOW TEMPERATURE AND FITTING MEMBER  
PRODUCED THROUGH SEPARATION BY FRACTURE SPLITTING AT  
LOW TEMPERATURE

- ☒ 1. Submitted herewith are the following:

32 pages of specification.

☒ Abstract.

2 sheet(s) of drawings.

10 claim(s).

☒ Oath/Declaration signed by each inventor.

☒ Application Data Sheet.

☐ Preliminary Amendment.

☐ Information Disclosure Statement(s).

☐ pages of Form PTO-1449, and one copy of each document listed thereon.

☐ Assignment of the invention, Cover Sheet, and payment of the \$\_\_\_\_\_ recordal fee.

☐ certified copy of application no. \_\_\_\_\_ filed in \_\_\_\_\_. Priority is claimed.

☒ check in the amount of \$ 770.00 including any assignment recordal fee.

- ☐ 2. SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.

- ☒ 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.

- ☐ 4. Insert before the first sentence of the specification: - - This application claims the benefit of provisional application number \_\_\_\_\_ filed \_\_\_\_\_. - -

- ☐ 5. Insert before the first sentence of the specification: - - This application is a Continuation-in-part of nonprovisional application number \_\_\_\_\_ filed \_\_\_\_\_. - -

- ☐ 6. Other: \_\_\_\_\_

The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.

THE FILING FEE IS CALCULATED AS FOLLOWS:

Basic Fee: \$770.00

Total Claims: 10

- 20 =

0

X \$18 =

Independent Claims: 2

- 3 =

0

X \$86 =

Correspondence Address:

23364

Customer Number

Multiple Dependent Claim (add \$290.00): \$290.00

Subtotal: \$770.00

50% Reduction if Small Entity Status:

Phone: 703-683-0500

Fax: 703-683-1080

Total: \$1,060.00

Date:

Name:

Signature:

Reg. No.

November 20, 2003

J. ERNEST KENNEY

19,179